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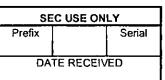
FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response.......16.00

OMB APPROVAL



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (theck if this is an amendment 2006 Domestic Fund II Limited Partners		ged, and indicate chang	e.)			_
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	Rule 506	Section 4(6)	☐ ULOE	_
Type of Filing: ☐ New Filing ☐ Ame	ndment					_
	A. BASIC	IDENTIFICATI	ON DATA	()		_
1. Enter the information requested about the issuer						_
Name of Issuer (check if this is an amendm	ent and name has ch	anged, and indicate ch	ange.)			
Parish Capital II, L.P.)78716 _	_
Address of Executive Offices		Street, City, State, Zip		Tele,		
5915 Farrington Road, Suite 202	Chapel Hill, N	North Carolina 275	017	(919) 401-4949	<u> </u>	_
Address of Principal Business Operations	(Number and S	Street, City, State, Zip	Code)	Telephone Number (In	cluding Area Code)	
(if different from Executive Offices)						26
Brief Description of Business					PROCESSE	ᅫ
Private equity fund investment						
Type of Business Organization					SEP 2 8 77777	Г
corporation	🖾 limited par	tnership, already forme	ed .	other (please spe		
business trust	☐ limited par	tnership, to be formed			THOMSON	_
Actual or Estimated Date of Incorporation or O	rganization:	Month 0	Y 0	ear 🔀 Actual	FINANCIAL	
Jurisdiction of Incorporation or Organization: (1	Enter two-letter U.S.	Postal Service abbrevi	ation for State;	<u> </u>		
	CN for Canada	a; FN for other foreign	jurisdiction)	DE		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid **OMB** control number.

		A. BASIC IDENTIFIC	CATION DATA	" '	
 Each beneficial owner Each executive office 	issuer, if the issuer has be r having the power to vot	een organized within the past five or dispose, or direct the vote of the issuers and of corporate generation issuers.	or disposition of, 10% or more		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)			· · · · · · · · · · · · · · · · · · ·	
Merritt, Charles E.					
Business or Residence Address (Number and Street, City,	State, Zip Code)			
5915 Farrington Road	, Suite 202, Chapel	Hill, North Carolina 2751	7		
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Mason, Jr., James A.	=- i				
Business or Residence Address (*	•			
5915 Farrington Road	, Suite 202, Chapel	Hill, North Carolina 2751			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
McCain, Wendell A.					
Business or Residence Address (Number and Street, City,	State, Zip Code)			
5915 Farrington Road	, Suite 202, Chapel	Hill, North Carolina 2751	7		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if inc Jeffrey, David	lividual)				
Business or Residence Address (Number and Street, City,	State, Zip Code)			
11 St James Place, Lo	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☑ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Parish Capital II GP, I	•				
Business or Residence Address (Number and Street, City,	State, Zip Code)			
5915 Farrington Road	, Suite 202, Chapel	Hill, North Carolina 2751	7		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)			- <u>-</u>	
Treasurer of the State	of North Carolina				
Business or Residence Address (I	Number and Street, City,	State, Zip Code)			
325 North Salisbury S	treet, Raleigh, Nortl	h Carolina 27603			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
New York State Teach	ners' Retirement Sys	stem			
Business or Residence Address (I		··· · · · · · · · · · · · · · · · · ·			
10 Corporate Woods I	•				
Check Box(es) that Apply:	Promoter	■ Beneficial Owner ■ Company of the last	☐ Executive Officer	Director	☐ General and/or Managing Partner

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				•				
Full Name (Last name first, if ind	lividual)							
California Public Emp	loyees' Retirement	System						
Business or Residence Address ()	Number and Street, City,	State, Zip Code)						
400 P Street, Suite 3492, Sacramento, CA 95814								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or			
					Managing Partner			
Full Name (Last name first, if ind	lividual)							
Louisiana State Emplo	yees' Retirement S	ystem						
Business or Residence Address ()	usiness or Residence Address (Number and Street, City, State, Zip Code)							
8401 United Plaza Bo	ulevard, Baton Rou	ge, Louisiana 70809						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	B. INFORMATION ABOUT OFFERING		
		Yes	No
I.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		\boxtimes
2.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?	\$4 m	illion
	The is the initial in council that will be decepted from any merricular.	Yes	No
3.	Does the offering permit joint ownership of a single unit?		×
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full	Name (Last name first, if individual)		
	Juniper Capital Group, LLC		
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)		
	212 Carnegie Center, Suite 102, Princeton, New Jersey 08540		
Nan	ne of Associated Broker or Dealer		
Full Bus Nam	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers AL	□ ID S ⋈ MO R □ PA Y □ PR □ All □ ID S □ MO R □ PA	States
Bus:	iness or Residence Address (Number and Street, City, State, Zip Code)		
Nan	ne of Associated Broker or Dealer		
	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers		C+-+
(Che	eck "All States" or check individual States)	=	States
	IL IN IIA IKS IKY ILA IME IMD IMA IMI IMN IM	_ =	
	☐MT ☐NE ☐NV ☐NH ☐NJ ☐NM ☒NY ☐NC ☐ND ☐OH ☐OK ☐OH	=	
	RI SC SD TN TX OUT VA WA WV WI W		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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	C. OFFERING PRICE, NUMBER OF INVESTOR	ORS, EXPENSES	AND USE OF P	ROCEEDS	3
1.	Enter the aggregate offering price of securities included in this offering and the already sold. Enter "0" if answer is "none" or "zero." If the transaction is an excepted this box and indicate in the columns below the amounts of the secure exchange and already exchanged.	change offering,			
	Type of Security		Aggregate		Amount Already
	Debt	\$	Offering Price 0	•	Sold 0
	Equity		0	_	0
	☐ Common ☐ Preferred	······ \$_		_ •_	
	Convertible Securities (including warrants)	\$	0	•	0
	Partnership Interests	· · · · · · · · · · · · · · · · · · ·	900,000,000	_	447,418,000
	Other (Specify)	· -	0	_	0
	Total	-	900,000,000	_	447,418,000
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ_	200,000,000	Ψ	447,410,000
2.	Enter the number of accredited and non-accredited investors who have purchased offering and the aggregate dollar amounts of their purchases. For offerings us indicate the number of persons who have purchased securities and the aggregate of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	nder Rule 504,			Aggregate
			Number of Investors		Dollar Amount of Purchases
	Accredited Investors		18	\$	447,418,000
	Non-accredited Investors	-	0	_	0
	Total (for filings under Rule 504 only)			_ <u>*</u> _	
	Answer also in Appendix, Column 4, if filing under ULOE.	-	<u> </u>	 -	
3.	If this filing is for an offering under Rule 504 or 505, enter the information rescurities sold by the issuer, to date, in offerings of the types indicated, in the two prior to the first sale of securities in this offering. Classify securities by type li Question 1.	lve (12) months			
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505	-		\$_	
	Regulation A	••		_	
	Rule 504	-		_	······································
	Total			_ \$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and dis securities in this offering. Exclude amounts relating solely to organization issuer. The information may be given as subject to future contingencies. If the expenditure is not known, furnish an estimate and check the box to the left of the	expenses of the ne amount of an			
	Transfer Agent's Fees	***************		3 \$	
	Printing and Engraving Costs			¥	3,600
	Legal Fees		_		222,332.67
	Accounting Fees			*-	,,_,
	Engineering Fees			*_	
	Sales Commissions (specify finders' fees separately)	.,,		*-	600,000
	Other Expenses (identify)			*-	,
	Total			· 	825,932.67

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C. OFFERING I	PRICE, NUMBER OF INVESTORS	, EXPENSE	ES A	ND USE OF PRO	CE	CED'	<u>s</u>
Question 1 and total expenses furnis	aggregate offering price given in response to hed in response to Part C - Question 4.a. This di ssuer."	fference is				\$_	446,592,067.33
used for each of the purposes shown. estimate and check the box to the left of	isted gross proceeds to the issuer used or prop If the amount for any purpose is not known, of the estimate. The total of the payments listed or set forth in response to Part C - Question 4.b. a	furnish an must equal					
		_		Payments to Officers, Directors, & Affiliates			Payments To Others
					\sqcup	. S _	
					\Box	\$_	
_	stallation of machinery and equipment		-			\$_	
Construction or leasing of plant b	uildings and facilities		\$_			\$_	
that may be used in exchange t	ncluding the value of securities involved in this for the assets or securities of another issuer pursu	iant to a	s	·		- S	
					Η	ς-	
			_		H	` <u> </u>	· · · · · · · · · · · · · · · · · · ·
<u> </u>	vate equity funds and portfolio companies	_	~				295 502 067 22
		· —	~_	61,000,000	_	_	385,592,067.33
	<u>nd)</u>			61,000,000			205 502 067 22
			₂ —	<u>81,000,000</u> ⊠ \$440		_	
I otal Payments Listed (column to	tals added)			△ 3446	3,33	2,00	17.55
	D. FEDERAL SIGN	ATURE					
The issuer has duly caused this notice to be s undertaking by the issuer to furnish to the U. accredited investor pursuant to paragraph (b)	igned by the undersigned duly authorized person S. Securities and Exchange Commission, upon v (2) of Rule 502.	n. If this notice written request o	is file of its	ed under Rule 505, the staff, the information for	follo	wing shed b	signature constitutes an y the issuer to any non-
Issuer (Print or Type)	Signature			Date			
Parish Capital II, L.P.	Quis & Mou	des		9/24/07			_
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Julie Plowden	By: Parish Capital II GF	, LLLP					
	By: Parish Capital A	-	P				
	By: Julie Plowe	-		Signatory			
		,			_		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 present	h rule?	Yes	No ⊠				
		See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to fun- such times as required by state law.	nish to any state administrator of any state in which this	notice is filed, a notice on F	Form D (17 CF	R 239.500) at			
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		is familiar with the conditions that must be satisfied to and understands that the issuer claiming the availability						
The		ontents to be true and has duly caused this notice to be	signed on its behalf by the	undersigned d	ıly authorized			
Issu	er (Print or Type)	Signature	Date					
	Parish Capital II, L.P.	Their b Plowder	9/24/07					
Nar	ne (Print or Type)	Title (Print or Type)						
	Julie Plowden	By: Parish Capital II GP, LLLP						
		By: Parish Capital Advisors, LLP						

By: Julie Plowden, Authorized Signatory

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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APPENDIX

1	:	2	3			4	· - ·	1	5
	Intend : non-acc invest St	to sell to credited lors in ate – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors					No
AL							"		
AK									
AZ									
AR									
CA		Х	Limited Partnership Interests \$900,000,000	4	\$85,000,000	0	\$0		Х
СО									
СТ		Х	Limited Partnership Interests \$900,000,000	2	\$15,000,000	0	\$0		х
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA							<u> </u>		
KS		Х	Limited Partnership Interests \$900,000,000	l	\$17,500,000	0	\$0		Х
KY									
LA		Х	Limited Partnership Interests \$900,000,000	l	\$50,000,000	0	\$0		Х
ME									
MD									
MA									

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MI	Х	Limited Partnership Interests \$900,000,000	1	\$4,000,000	0	\$0	X
MN		\$700,000,000					
MS							
МО				1		1	
MT		-		+	·		
NE				<u> </u>			
NV						†	
NH							
NJ		1					
NM							
NY	Х	Limited Partnership Interests \$900,000,000	1	\$100,000,000	0	\$0	х
NC	Х	Limited Partnership Interests \$900,000,000	4	\$135,918,000	0	\$0	Х
ND							
ОН							
ок							
OR							
PA	Х	Limited Partnership Interests \$900,000,000	1	\$5,000,000	0	\$0	х
RI					,		
SC							
SD							
TN							
TX							
UT							
VT							
VA							
WA	Х	Limited Partnership Interests \$900,000,000	1	\$10,000,000	0	\$0	Х
wv							
WI							
WY							
PR				•			